

CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

J. D. DUNSHEE, M.D., Director

# Weekly Bulletin



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GUY P. JONES  
EDITOR

## Unsatisfactory Terms for Cause of Death

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Acute Indigestion—Give the cause.

Burns—State if burning building involved, also nature of burns, scalded or fire.

Broncho Pneumonia—Under 10 years always give contributory cause.

Cancer—Was the growth benignant or malign?

Childbirth—State fully as to actual cause.

Heart—Cardio, renal, state disease of heart and kidney fully.

Injury—What was the nature of the injury, and was it accidental, suicidal or homicidal?

Lung Trouble—Was it pulmonary tuberculosis? Was it lobar or broncho pneumonia?

Malignant Disease—Was it scarlet fever, diphtheria, cancer, or other disease to which the very indefinite adjective “malignant” may be applied?

Malignant Sore Throat—Was not this diphtheria?

Malnutrition—What disease caused the malnutrition?

Marasmus—What disease caused the “marasmus”? Was it due to tuberculosis, syphilis, or cholera infantum? State fully, as this return in itself is practically worthless for compilation.

Meningitis—Was it epidemic cerebro-spinal meningitis? If so, write exactly in this form, being particular not to omit the word “epidemic.” Did it

follow scarlet fever, pneumonia, or some acute infection? If so, name the primary disease. Was it traumatic? If so, state the nature of the violence which caused the meningitis. Was it tuberculosis meningitis?

Natural Causes—Name the disease causing death. The statement “natural causes” is entirely worthless, although frequently reported by coroners.

Nephritis—Was it acute or chronic, parenchymatous or interstitial? If acute, occurring in the course of some disease, name the disease causing death.

Paralysis—Give cause of paralysis, if known, or state definite form, as paralysis agitans, infantile paralysis, etc. Did the paralysis follow cerebral hemorrhage? Give the primary cause.

Paralysis of Heart—This is usually a mere synonym of “heart failure” and should never be used or accepted. See “Heart Failure.”

Peritonitis—Give cause of peritonitis. Was it puerperal or traumatic? In the latter case, state mode of injury.

Pneumonia—Lobar or broncho.

Pulmonary Hemorrhage—Was it not due to pulmonary tuberculosis?

Pyemia—What caused the pyemia? Was it puerperal or traumatic? If traumatic, state nature of accident.

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**Rheumatism**—State whether acute or chronic. If chronic, note any organic disease of the heart or other organs resulting therefrom.

**Septicemia**—See blood poisoning.

**Spinal Trouble**—Was this a disease of the spinal cord or of the spine, and, in either case, what was the disease? Was it Pott's Disease of the spine?

**Stillborn**—Never report a child as stillborn unless dead at birth. If the child survived any time whatever, the cause of death should be stated.

**Stomach Trouble**—Was it cancer, round ulcer, or other definite disease of stomach? State fully, as this, alone, is very indefinite and unsatisfactory.

**Strangulation**—Was this strangulation from disease (diphtheria), choking or hanging? If from disease, state fully. If from hanging, state whether suicidal or legal execution.

**Suffocation**—State very precisely the cause of the suffocation, as this term, returned alone, is very indefinite. See Asphyxia.

**Teething**—Name disease affecting the teething child.

**Tonsilitis**—Was death not due to diphtheria? This is a suspicious return.

**Toxemia**—Was this acute or chronic poisoning due to some external agent? Was it autointoxication, due to poisons generated in the body by disease? If so, state the name of the disease.

**Tuberculosis**—State organ affected. Do not fail to state as pulmonary tuberculosis if lungs were affected.

**Tumor**—Was it a cancer? Whether a cancer or tumor, do not fail to specify organ or part of the body affected.

**Ulcer**—State location and cause.

**Uremia or Uremic Poisoning**—State cause of uremia. If due to an acute disease, the latter should be named as the cause of death. If in Bright's or other organic disease, state fully. Was it puerperal?

**Violence**—State form of violence and whether accidental, suicidal or homicidal.

study of theories principles, or facts; it means earnestness in application to a subject or pursuit. The definition also includes laboriousness, which "requires labor, perseverance, or even sacrifice." Diligence, if made habitual, becomes industry; and a research worker, if he is to attain success or any great height, must not only be diligent, but also industrious. As Lyman Abbot has well asserted, "scholarship requires persistence in study of matter that repels or even bores the students."

The search after truth! That is the real mission of a scientist. There are those persons who are, indeed, endowed with a rich and prolific imagination; but a scientific investigator curbs his theories with reason, applies his principles soundly, and above all, seeks the truth in its naked form and presents his facts uncolored and undressed.

The officers of the Philippine Health Service have exceptional opportunities to perform researches, surveys, or investigations into subjects bearing on administration, sanitation, and hygiene. Those officers who are detailed in hospitals can well delve into the mysteries of medicine, pathology, the clinical laboratory, or into the recesses of anatomy, physiology, and surgery. Such opportunities should not be allowed to pass unused. Observations of phenomena should be carefully recorded for immediate or remote use, for the record of these observations, the compilation of facts and figures, or the disquisition of theories and principles constitutes medical literature.

Numerous are our health problems of national import which still await solution. Some of them are similar to those problems obtaining in other countries; others are peculiarly our own. We have heretofore been largely dependent upon the observations in other countries for the solution of our problems. Results found in one country, may, indeed, find a general application to all the rest; but danger lurks in the blind adoption of measures found to have been beneficent in certain localities. It is, therefore, incumbent upon our health officers to contribute to the solution of our own national health problems, to the determination of the diagnosis, transmission, cure, and eradication of diseases peculiar to our country, and may we hope that our findings here will find usefulness in other countries. There is no other grand accomplishment which will more rapidly and securely place the Philippines on the world's map of beautiful dreams fondly nursed and worthily realized.

### THE SPIRIT OF RESEARCH

Research has been defined as the "diligent inquiry or examination in seeking facts or principles: laborious or continued search after truth." It is the spirit of research which has led to the great discoveries in medicine, surgery, and hygiene, and to the invention of appliances used in all the arts and sciences, nay, in our everyday life.

The definition implies diligence. A diligent inquiry means a careful, devoted, painstaking, and steady

SIXTO Y. OROSA,

*Chairman, Committee on Publications  
(Chief, Division of Hospitals), Manila, P. I.*



**NOTICE TO LABORATORY DIRECTORS CONCERNING THE NEW LABORATORY LAW**

Under the provisions of Chapter 638, Statutes of 1935, all clinical laboratories not exempted by law must be under the direct supervision of a licensed physician and surgeon or of a licensed clinical laboratory technologist.

Any person, not a physician, who has been engaged continuously in the *work and management* of a clinical laboratory, either as owner or director, for a period of not less than five years immediately preceding September 15, 1935, the date the law becomes effective, the last year of which has been in the State of California, is eligible to receive a license without examination. All such persons should apply to the State Bureau of Laboratories, Berkeley, California, for application forms.

All clinical laboratory directors who are not licensed physicians and surgeons and who can not qualify under the foregoing must take an examination to secure the technologist's license, failing which, they may not continue as director of the laboratory, but must, if the owner thereof, employ another who is licensed by law to conduct a clinical laboratory.

An examination for clinical laboratory technologist will be held in the near future and all laboratory directors who need to take this examination should apply at once for application forms.

Licensed physicians and surgeons, who conduct clinical laboratories and who receive work pertaining to patients other than their own, must secure a permit for each laboratory. Application for forms to be used in requesting a permit should be sent in without undue delay.

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**INFORMATION FOR TECHNICIANS**

Under Chapter 638 recently passed by the Legislature technicians must, after September 15, 1936, hold a technician's license issued by the State Board of Public Health. The principal exception is in laboratories conducted by physicians for use in their own practice and provided they do not receive specimens from other doctors or from patients of other doctors. A group of physicians occupying one suite of offices comes under the same exception. Not all persons in a clinical laboratory come under the classification of technician. A limited number, at least one and in some cases two, may be classed as apprentices until able to pass the examination.

The certificate of license as "clinical laboratory technician" is issued by examination covering the whole field of clinical laboratory work. The fee for

the examination is \$5, not returnable in case of failure, and the annual renewal fee is \$1. The certificate entitled its holder to engage in any phase of clinical laboratory work, but not to direct the work of a laboratory excepting under a physician or a clinical laboratory technologist. College degrees and experience count toward the certificate, but the examination paper must reach a certain grade of excellence regardless of experience.

The individual certificates in bacteriology, serology, bio-chemistry and parasitology are continued and the examination fee for these is \$2 for each examination, not returnable in case of failure. The renewal fee is 50 cents for each senior certificate, payable annually. The senior certificate entitles the holder to engage unsupervised in the work covered by that certificate only. It serves to provide for a limited license in laboratories where the technician is not required to do all types of work.

Junior grade certificates are issued to applicants who make a certain grade but do not give evidence of that degree of proficiency required by the holder of a senior grade certificate. Junior certificates do not require annual renewal.

Persons who accumulate all four senior certificates may turn them in and secure in exchange the certificate as clinical laboratory technician without further examination and without fee if the certificates were secured after the passage of the law. If secured before the passage of the law, a fee of \$5 is required.

Applications to take the examination must be filed two weeks in advance of the advertised date. Information regarding the date, hour and place of examination is sent to each person who has an application on file, together with a card of admittance, several days before.

Those desiring information as to the scope of the examination should write for Bulletin No. 9. Special forms on which to apply for the examination will be sent on request.

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**PUBLIC HEALTH NURSING EXAMINATION ANNOUNCED**

The next examination for Public Health Nursing Certificate will be held simultaneously at San Francisco and Los Angeles on Saturday, December 21, 1935.

Completed applications must be on file in the office of the Department of Public Health, 312 State Building, San Francisco, not later than November 15, 1935.

J. D. DUNSHEE, M.D.,  
*Director of Public Health.*



## MORBIDITY

Complete Reports for Following Diseases for Week Ending  
August 17, 1935

## Chickenpox

56 cases: Alameda 4, Berkeley 2, Oakland 2, Los Angeles County 2, Inglewood 1, Long Beach 1, Los Angeles 13, Montebello 1, Chowchilla 1, Napa County 1, Sacramento 1, San Bernardino 1, San Diego County 1, San Diego 10, San Francisco 8, San Mateo County 2, Lompoc 1, Palo Alto 2, San Jose 2.

## Diphtheria

15 cases: Berkeley 2, Fresno County 1, Los Angeles County 2, Los Angeles 2, Madera County 1, Santa Ana 1, Sacramento 1, San Diego County 1, National City 2, San Diego 1, Santa Paula 1.

## German Measles

42 cases: Berkeley 1, Oakland 4, Los Angeles County 1, Los Angeles 10, Monrovia 1, Pasadena 3, San Fernando 1, Santa Monica 1, Lynwood 1, Sacramento 1, San Diego County 1, San Diego 1, San Francisco 12, Menlo Park 1, Gilroy 1, Santa Clara 1, Woodland 1.

## Influenza

10 cases: Beverly Hills 1, Los Angeles 7, Monterey Park 1, Tustin 1.

## Malaria

2 cases: San Joaquin County 1, Yuba County 1.

## Measles

127 cases: Alameda County 1, Berkeley 2, Oakland 5, Amador County 2, Contra Costa County 2, Fresno County 1, Lemoore 1, Los Angeles County 10, Glendale 3, Huntington Park 1, Long Beach 4, Los Angeles 23, Pasadena 1, Redondo 2, San Fernando 1, Lynwood 2, Madera County 1, Salinas 3, Santa Ana 1, Placer County 1, Sacramento 1, San Diego County 2, San Diego 2, San Francisco 30, Manteca 2, Santa Barbara County 1, Lompoc 9, Santa Clara County 2, Palo Alto 3, San Jose 2, Sutter County 1, Santa Paula 1, Woodland 4.

## Mumps

57 cases: Alameda 1, Berkeley 5, Oakland 11, El Dorado County 1, Los Angeles County 4, Beverly Hills 1, Glendora 1, Huntington Park 1, La Verne 1, Los Angeles 7, San Fernando 1, Sierra Madre 2, Newport Beach 1, Sacramento 5, San Diego County 4, San Francisco 1, Santa Barbara County 1, Santa Maria 1, Santa Cruz 3, Siskiyou County 1, Woodland 1, Marysville 3.

## Pneumonia (Lobar)

31 cases: Alameda County 1, Oakland 1, Los Angeles County 2, Alhambra 1, Beverly Hills 1, Los Angeles 14, Manhattan 1, Pomona 1, Santa Monica 1, Santa Ana 2, Riverside County 1, Sacramento 3, San Bernardino 1, San Diego 1.

## Scarlet Fever

68 cases: Oakland 4, Colusa County 1, Fortuna 1, Bakersfield 1, Los Angeles County 5, Inglewood 1, Long Beach 2, Los Angeles 15, Pasadena 1, Redondo 1, San Gabriel 1, Santa Monica 1, Huntington Beach 1, Placer County 1, Riverside County 3, Elsinore 2, Sacramento 9, San Bernardino County 1, San Diego County 1, San Diego 2, San Francisco 4, Lodi 1, Burlingame 1, Santa Barbara County 1, Santa Clara County 1, Palo Alto 1, Dinuba 1, Sonora 1, Oxnard 2, Yuba County 1.

## Smallpox

One case: Siskiyou County.

## Typhoid Fever

10 cases: Fresno County 1, Hanford 2, Huntington Park 1, Napa 1, Sacramento County 1, San Francisco 1, San Joaquin County 1, Vallejo 1, California 1.\*

## Whooping Cough

107 cases: Alameda 2, Berkeley 7, Hayward 5, Oakland 9, Los Angeles County 6, Alhambra 2, Glendale 2, Hermosa 3, Los Angeles 18, Monterey Park 3, Monterey County 2, Fullerton 1, Orange 1, Placer County 2, Sacramento 2, San Bernardino 1, San Diego County 2, San Diego 16, San Francisco 19, Santa Clara County 3, Compton 1.

## Meningitis (Epidemic)

3 cases: Los Angeles County 1, Mendocino County 1, Sacramento 1.

## Dysentery (Amoebic)

One case: Riverside County.

## Dysentery (Bacillary)

7 cases: Los Angeles 5, San Francisco 2.

## Ophthalmia Neonatorum

One case: Oakland.

## Pellagra

2 cases: Los Angeles County 1, San Francisco 1.

## Poliomyelitis

43 cases: Contra Costa County 1, Kern County 8, Bakersfield 1, Los Angeles County 1, Glendale 1, Long Beach 1, Los Angeles 8, Torrance 1, Hawthorne 1, South Gate 1, Sacramento 1, Ontario 1, San Francisco 1, Stanislaus County 1, Visalia 14, Marysville 1.

## Tetanus

One case: Oxnard

## Trachoma

5 cases: Oakland 1, Modoc County 1, Riverside County 1, San Francisco 1, San Bruno 1.

## Encephalitis (Epidemic)

One case: Fresno.

## Paratyphoid Fever

2 cases: Oakland 1, California 1.\*

## Jaundice (Epidemic)

2 cases: Riverside County.

## Food Poisoning

5 cases: Los Angeles County 4, San Francisco 1.

## Undulant Fever

One case: Bell

## Septic Sore Throat (Epidemic)

One case: Chico.

## Rabies (Animal)

11 cases: Contra Costa County 1, Los Angeles County 1, Los Angeles 6, Pasadena 1, National City 1, Stockton 1.

\* Cases charged to "California" represent patients ill before entering the state or those who contracted their illness traveling about the state throughout the incubation period of the disease. These cases are not chargeable to any one locality.

Society flourishes by the antagonism of its atoms.—  
Herbert Spencer.

There are no common people but they who think  
commonly and without imagination or beauty.

The cynic is one who knows the price of everything  
and the value of nothing.—Oscar Wilde.

Criticism takes the cumbersome mass of creative  
work and distils it into a finer essence.—Oscar Wilde.

He would climb a tree must grasp its branches  
—not the blossoms.—Thackeray.

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